PTO/SB/06 (06-03)
Approved for use through 7/31/2006, CMB 0651-0032
and and frademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Peperwork Reduction Act of 1993, no persons ere required to respond to a collection of information unless it displays a valid QMB control number.									
PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-815									609
CI	SMALL E	YIITM	OR	OTHER SMALL					
FOR NUMBER FILED		FILED	NUMBER EXTRA		RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))							OR		<u>. 890</u>
TOTAL CLAIMS (2) OFR 1.18(4)	8'	minus 20 =		0	X 88		OR	×3	0
INDEPENDENT CLAIMS (37 CFR 1.18(0))	1	minus 3 •	$\cdot \cdot \cdot$	)	x 00		OR	x 3•	Q
MILITIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(4))					+5=		OR	+3	0
" if the difference in column 1 is less than zero, enter "O" in column 2.					TOTAL		OR	TOTAL	890
CLAIMS AS AMENDED - PART II									
3/10/A/A (COMMON 1)			(Column 2) (Column 3)		SMALL ENTITY		OR		R THAN ENTITY
∢ R	CLAIMS EMAINING AFTER GENOMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total All Total Constitution Co	7	Minus '	- 20	·0	X 5=		OR	X \$=	0
N by cas rises	7	Minus	- à	Ö	×1		OR	X 5=	O
ARST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(9))					*1 *		OR	+1 .	0
This Present Present Control of the					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	ठ
	3-4 4\		(Calumn 2)	(Column 3)	ADDEVAL (				
<del></del>	CLAIMS		HIGHEST				1		1
	EMAINING AFTER	1	NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		PATE	ADDI- TIZNAL
	ENDMENT	Minus	PAID FOR	-		FEE		$\vdash \leftarrow$	FEE
O COST. (Sep	8		<u> </u>	0	X 8		OR	ו—>	{
D Independent profes Luips	1	Minus	<u> </u>	1.0	×		OR	× 3	<del></del>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.18(0))						<u></u>	OR	-	<u> </u>
75-2101/0					ADOL FEE		OR	DOL FEE	
7/00/	cotumen 1)		(Calumn 2)	(Column 3)			,	<del></del>	
	CLAIMS EMAINING AFTER MENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADOI- TIONAL FEE	·	RATE	ADDI-) TIONAL FEE
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Z independent (1400)	7/	Minus	" A	1-7	X 3		. CR	x 4	IV
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (NF CFR 1.16(4)) +1 s							CR	+ 5 -	
TOTAL ADDITEE							OR	TOTAL ADO'L FEE	$V \setminus$
t if the entry in column 1 is treat than the entry in column 2, write 'O' in column 3.									
"If the "Highest Humber Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".									

"If the "Highest Number Previously Peid For" (N THIS SPACE is less than 3, enter "7".

The "Highest Number Previously Peid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fits (and by the USPTO to process) as application. Confidentiating is governed by 35 U.S.C. 122 and 37 CFR 1.16. This collection is estimated to table 12 minutes to complete, including gathering, preparing, and submitting the correlated application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form surfain suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patern on Trademark Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Paterns, P.O. Box 1459, Alexandria, VA 22313-1450.